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I hereby revoke all previous powers of attorney given in the above-identified application.						
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l am the: ☐ Applicant/Inventor.						
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
Signature Jaffe A from						
	, Paton Alipmby for BOSTON SCIENTIFIC SCIMED, INC.					
Date Nov	18,5010		Telephone	763-494-1700		
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COMMONWEALTH OF MASSACHUSETTS

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) ss

On this 13th day of January , 2011 before me personally appeared Timothy A. Pratt to me known and known to me to be the person described in and who executed the foresoing instrument, and he duly acknowledged to me that he executed the same for the uses and purposes set forth herein.

Notary Public

